## **Vermont Mental Health Performance Indicator Project**

DDMHS, Weeks Building, 103 South Main Street, Waterbury, VT 05671-1601 (802-241-2638)

## MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project

Advisory Group and Interested Parties

FROM: John Pandiani and Christine Van Vleck

DATE: November 28, 2003

RE: Medicaid Medical Services to CRT Clients and Others

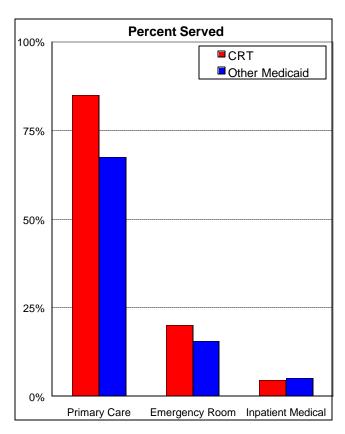
The Vermont Medical Home Project (Department of PATH) is working to increase access to medical care for individuals served in Community Rehabilitation and Treatment (CRT) programs for adults with serious mental illness. In conjunction with this project's reporting requirements, the Vermont Mental Health Performance Indicator Project (PIP) compared utilization of inpatient and outpatient medical services for CRT clients to the utilization rates for other Medicaid enrollees.

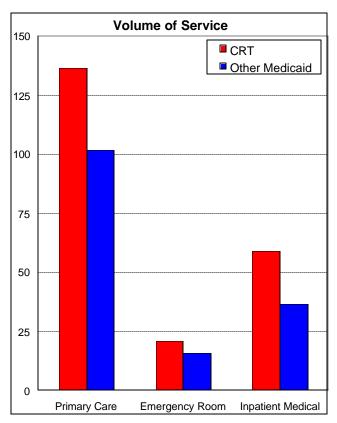
This analysis involved linking two Medicaid eligibility files (one for CRT clients and one for other enrollees) with three Medical service files (one each for outpatient primary care, emergency room, and inpatient medical care) for CY2002. This linkage was based on the Vermont Medicaid database unique ID number. This linkage provided measures of the proportion of individuals in the two eligibility categories who used each type of service and the amount of service that was used. In order to compare CRT utilization rates to the utilization rates for other adult Medicaid enrollees, a measure of relative utilization was calculated. Relative utilization was derived by dividing the rates for CRT clients by the rates for other Medicaid enrollees. A relative utilization rate of 1.0 would indicate that there was no difference between the two rates. A relative utilization rate greater than 1.0 indicates that CRT clients had a higher utilization rate than other adult Medicaid enrollees. A relative utilization rate that is less than 1.0 indicates that CRT clients have a lower utilization rate.

As you will see, almost seven out of eight CRT clients (85%) made use of outpatient primary care services during CY2002, hospital emergency room services were used by one in five CRT clients (20%), and while less than one in twenty CRT clients (4%) were admitted for inpatient medical care. Compared to other Medicaid enrollees, CRT clients were more likely to access outpatient primary care services (85% vs. 67%) and emergency care services (20% vs. 15%), but were less likely to have a medical hospital admission (4% vs. 5%). In terms of volume of service, CRT clients used more medical care services (per enrollee) than other Medicaid enrollees as a whole for all three types of services. CRT clients had 1.3 times as many medical primary care visits per enrollee as other Medicaid enrollees, and 1.6 times as many medical inpatient days per enrollee as other Medicaid enrollees.

We look forward to you interpretation of these findings, and you suggestions for further analysis. As always, you can reach us at pip@ddmhs.state.vt.us or 802-241-2638.

## Number Served and Medical Service Utilization for Community Rehabilitation and Treatment Clients and Other Medicaid Enrollees Vermont 2002





Individuals Served									
	CRT Clients (n=2,447)			Other Medicaid Enrollees (n=98,842)		Relative			
	Number	Percent	]	Number	Percent	Utilization			
Outpatient Primary Care	2,080	85%		66,581	67%	1.3			
Emergency Room	490	20%		15,235	15%	1.3			
Inpatient Medical	110	4%		4,891	5%	0.9			

Volume of Service									
	CRT Clients (n=2,447)			Other Medicaid Enrollees (n=98,842)					
	Total Visits/Days	Visits/Days Per 100 Enrollees		Total Visits/Days	Visits/Days Per 100 Enrollees	Relative Utilization			
Outpatient Primary Care	3,339	136		100,343	102	1.3			
Emergency Room	504	21		15,582	16	1.3			
Inpatient Medical	1,441	59		35,827	36	1.6			

Other Medicaid enrollees include all Vermont residents aged 18 and older during calendar year (CY) 2002 who were enrolled in Medicaid but not enrolled in CRT. CRT clients include all individuals aged 18 and older who were enrolled in CRT CY 2002. Primary care services include general practice, family practice, internal medicine, osteopathic manipulative therapy, nurse practitioner, and pediatric medicine visits. Primary care recipients include all individuals with a paid primary care claim during CY 2002. Emergency room services include all Medicaid paid ER claims during CY 2002.

Inpatient medical services include all Medicaid paid claims with a non-mental health diagnosis code. Inpatient medical days include all days billed to Medicaid.